Case 18-23623 Doc 1 Filed 08/21/18 Entered 08/21/18 15:35:03 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: | | |
|-------------------------------------------------|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|----|--------------------|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-----------------------------------------------|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | ır full name | | |
| | Writ | Write the name that is on your government-issued picture identification (for example, your driver's icense or passport). | Joshua | |
| | pict | | First name | First name |
| | licer | | Middle name | Middle name |
| | Bring your picture | | Caban | |
| | | ntification to your eting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All | other names you have d in the last 8 years | | |
| | Incl | untile last o years ude your married or den names. | | |
| 3. | you nun Indi | y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number | xxx-xx-8514 | |

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Case number (if known)

Debtor 1 Joshua Caban

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2707 North Lawndale Chicago, IL 60647 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Joshua Caban

| Par | Tell the Court About | Your B | ankruptcy Ca | se | | | | | | |
|-----|---------------------------------------------------------------------------------------|---------------|--------------|-----------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| 7. | The chapter of the Bankruptcy Code you are | Chec (Forn | | | of each, see Notice Required by page 1 and check the appropria | / 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy ate box. | | | | |
| | choosing to file under | Chapter 7 | | | | | | | | |
| | | □ Chapter 11 | | | | | | | | |
| | | □ Chapter 12 | | | | | | | | |
| | | □с | hapter 13 | | | | | | | |
| | | | | | | | | | | |
| 8. | How you will pay the fee | | about how yo | u may pay. Typ attorney is subr | ically, if you are paying the fee y | ck with the clerk's office in your local court for more details rourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with | | | | |
| | | | | | callments. If you choose this opt s (Official Form 103A). | ion, sign and attach the Application for Individuals to Pay | | | | |
| | | | | | | on only if you are filing for Chapter 7. By law, a judge may, | | | | |
| | | | | | | our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out | | | | |
| | | | | | | icial Form 103B) and file it with your petition. | | | | |
| | | | | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No | | | | | | | | |
| | last 8 years? | □ Ye | | | | _ | | | | |
| | | | District | | When | Case number | | | | |
| | | | District | | When | Case number | | | | |
| | | | District | | When | Case number | | | | |
| 10. | Are any bankruptcy | ■ No |) | | | | | | | |
| | cases pending or being filed by a spouse who is | □ Ye | | | | | | | | |
| | not filing this case with you, or by a business partner, or by an affiliate? | | | | | | | | | |
| | | | Debtor | | | Relationship to you | | | | |
| | | | District | | When | Case number, if known | | | | |
| | | | Debtor | | | Relationship to you | | | | |
| | | | District | | When | Case number, if known | | | | |
| 11. | Do you rent your | | o. Go to l | ne 12. | | | | | | |
| | residence? | ■ Ye | | ur landlord obta | nined an eviction judgment again | st you? | | | | |
| | | — Y 6 | | No. Go to line | | • | | | | |
| | | | - | | | | | | | |
| | | | | Yes. Fill out <i>Ini</i> bankruptcy pet | | Judgment Against You (Form 101A) and file it with this | | | | |

Debtor 1 Joshua Caban Document Page 4 of 48 Case number (if known)

| ar | Report About Any Bu | sinesses | You Own | as a Sole Propriet | or | | | | |
|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | to Part 4. | | | | | |
| | | ☐ Yes. | Name | and location of busi | ness | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, State | e & ZIP Code | | | | |
| | it to this petition. | | Check | the appropriate box | k to describe your business: | | | | |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) | | | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | | | |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) | | | | |
| | | | | Commodity Broker | r (as defined in 11 U.S.C. § 101(6)) | | | | |
| | | | | None of the above | | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines | s. If you in is, cash-fl .C. 1116(| dicate that you are a ow statement, and fo 1)(B). | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure | | | | |
| | For a definition of small | No. | ı am n | ot filing under Chap | ter 11. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| | | ☐ Yes. | I am fi | ling under Chapter 1 | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| Par | t 4: Report if You Own or | Have Anv | Hazardo | us Property or Any | Property That Needs Immediate Attention | | | | |
| | Do you own or have any | | | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and | ■ No. □ Yes. | What is t | he hazard? | | | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | iate attention is why is it needed? | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? | | | | | |
| argoni ropano. | | | | | Number, Street, City, State & Zip Code | | | | |

Debtor 1 Joshua Caban Document Page 5 of 48 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|------------------------------------------------------|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Page 6 of 48 Case number (if known) Document Debtor 1 Joshua Caban Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16a. 16. What kind of debts do individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain 16b. money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. I am not filing under Chapter 7. Go to line 18. 17. Are you filing under ☐ No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes. are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses No. are paid that funds will be available for ☐ Yes distribution to unsecured creditors? **25,001-50,000** □ 1.000-5.000 18. How many Creditors do 1-49 you estimate that you **50.001-100.000** □ 5001-10,000 **50-99** owe? ☐ More than 100,000 □ 10,001-25,000 □ 100-199 □ 200-999 □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million How much do you **\$0 - \$50,000** estimate your assets to □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million ☐ \$50.001 - \$100.000 be worth? □ \$10.000.000.001 - \$50 billion □ \$50,000,001 - \$100 million □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million □ \$500.000.001 - \$1 billion □ \$1,000,001 - \$10 million 20. How much do you \$0 - \$50,000 □ \$1,000,000,001 - \$10 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$50.001 - \$100.000 □ \$10,000,000,001 - \$50 billion to be? □ \$50,000,001 - \$100 million □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand, making a false, statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in lines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 357 Signature of Debtor 2 Joshua Caban Signature of Debtor 1 Executed on Executed on MM / DD / YYYY MM / DD

Filed 08/21/18 Entered 08/21/18 15:35:03

Desc Main

Case 18-23623 Doc 1

Case 18-23623 Doc 1 Filed 08/21/18 Entered 08/21/18 15:35:03 Desc Main Document Page 7 of 48 Case number (if known) Debtor 1 Joshua Caban I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed For your attorney, if you are under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter represented by one for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the If you are not represented by schedules filed with the petition is incorrect. an attorney, you do not need to file this page. Signature of Attorney for Debtor Thayer C. Torgerson Printed name

Email address

ted@tedtorgersonlaw.com

Contact phone **773-772-0844**

Chicago, IL 60647 Number, Street, City, State & ZIP Code

Firm name

Law Office of Thayer C. Torgerson

2400 North Western Avenue

6204662 IL Bar number & State

| | | Docume | eni Pade 8 di 48 | |
|--------------------|--------------------------|-------------------|------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Joshua Caban | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| Jnited States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number _ | | | | |

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as | sets f what you own |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 1,410.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 1,410.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | Your lia | bilities you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 13,315.47 |
| | Your total liabilities | \$ | 13,315.47 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,488.50 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,590.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sch | edules. |
| | ■ Yes | | |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Joshua Caban Document Page 9 of 48 Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--------------------------------------------------------------------------------------------------------------|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

\$______2,899.56

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|------------------------------------------------------------------------------------------------------------------------------|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | | Document | Page 10 of 48 | |
|---------------------------------|--------------------------------------------------|------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Fill in this inforn | nation to identify your | case and this filing: | | |
| Debtor 1 | Joshua Caban | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT OF I | LLINOIS | |
| Case number _ | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official Fo | rm 106A/B | | | |
| _ | e A/B: Prop | ertv | | 12/15 |
| n each category, s | eparately list and describ | e items. List an asset only once | . If an asset fits in more than one category, list t | |
| nformation. If more | space is needed, attach | | ople are filing together, both are equally respon n the top of any additional pages, write your nan | |
| Answer every ques | tion. | | | |
| Part 1: Describe | Each Residence, Building | g, Land, or Other Real Estate You | u Own or Have an Interest In | |
| . Do you own or h | ave any legal or equitabl | e interest in any residence, build | ling, land, or similar property? | |
| No. Go to Part | 2. | | | |
| ☐ Yes. Where is | s the property? | | | |
| Part 2: Describe | Your Vehicles | | | |
| | | | es, whether they are registered or not? Incl | |
| | • | • | 6: Executory Contracts and Unexpired Leases | i. |
| 3. Cars, vans, tru | ıcks, tractors, sport u | tility vehicles, motorcycles | | |
| ■ No | | | | |
| ☐ Yes | | | | |
| • | | | rehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories | |
| ■ No | | | | |
| ☐ Yes | | | | |
| | | | | |
| 5 Add the dolla | r value of the portion | you own for all of your entrie | es from Part 2, including any entries for | 00.00 |
| .pages you ha | ve attached for Part 2 | Write that number here | | \$0.00 |
| Part 3: Describe | Your Personal and Hous | ehold Items | | |
| Do you own or h | nave any legal or equit | able interest in any of the fo | llowing items? | Current value of the portion you own? |
| | | | | Do not deduct secured claims or exemptions. |
| • | ods and furnishings jor appliances, furniture | , linens, china, kitchenware | | |
| Yes. Descr | ibe | | | |
| | Househo | d Furniture | | \$500.00 |
| | | | | |

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

Case 18-23623 Doc 1 Filed 08/21/18 Entered 08/21/18 15:35:03 Desc Main Document Page 11 of 48 Case number (if known) Debtor 1 Joshua Caban 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$900.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$10.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No

■ Yes......Institution name:

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Case number (if known) Document

Debtor 1 Joshua Caban

| | | 17.1. | checking acount | | Chase Bank | \$500.0 |
|-----|---------------------------------------------------------|--------------------------|------------------------------------------------|--------|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| 18. | Bonds, mutual funds, Examples: Bond funds, | | | erag | ge firms, money market accounts | |
| | ■ No □ Yes | | Institution or issuer na | ame: | : | |
| 19. | Non-publicly traded st joint venture ■ No | ock and i | nterests in incorpora | atec | d and unincorporated businesses, including an interest in | an LLC, partnership, an |
| | ☐ Yes. Give specific inf | | about them | | % of ownership: | |
| | Negotiable instruments | include p nents are t | ersonal checks, cashi hose you cannot trans | iers' | e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them. | |
| | · | | er name: | | | |
| 21. | Retirement or pension Examples: Interests in No | | | 3(b), | thrift savings accounts, or other pension or profit-sharing plan | s |
| | ☐ Yes. List each accour | | ely. of account: | | Institution name: | |
| 22. | Examples: Agreements | d deposit | s you have made so th | | you may continue service or use from a company utilities (electric, gas, water), telecommunications companies, | or others |
| | ■ No □ Yes | | | | Institution name or individual: | |
| 23. | | or a period | lic payment of money | to y | ou, either for life or for a number of years) | |
| | ■ No □ Yes Is | suer name | e and description. | | | |
| 24. | 26 U.S.C. §§ 530(b)(1), | | | alifie | ed ABLE program, or under a qualified state tuition progra | m. |
| | ■ No □ Yes In | stitution n | ame and description. | Sep | parately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | Trusts, equitable or fu ■ No | ture inter | ests in property (oth | ner t | han anything listed in line 1), and rights or powers exercis | sable for your benefit |
| | ☐ Yes. Give specific inf | ormation | about them | | | |
| 26. | _ ' | | | | ner intellectual property m royalties and licensing agreements | |
| | ■ No □ Yes. Give specific inf | ormation | about them | | | |
| 27. | , , , , , , , , , , , , , , , , , , , , | | | | re association holdings, liquor licenses, professional licenses | |
| | ■ No□ Yes. Give specific inf | ormation | about them | | | |
| M | oney or property owed t | to you? | | | | Current value of the portion you own? Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 3

claims or exemptions.

Entered 08/21/18 15:35:03 Case 18-23623 Filed 08/21/18 Document Page 13 of 48 Case number (if known) Debtor 1 Joshua Caban 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No \square Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$510.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Doc 1

Official Form 106A/B

Desc Main

Schedule A/B: Property

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Case number (if known)

| 5 0 | Do you have other property of any kind you did not alread | v liet? | | |
|------------|-----------------------------------------------------------------------------------------------------------------|----------|---------------|--------|
| ეა. | Do you have other property of any kind you did not already Examples: Season tickets, country club membership | y iist : | | |
| ı | ■ No | | | |
| I | ☐ Yes. Give specific information | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Wri | ite tha | t number here | \$0.00 |
| Par | t 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$0.00 | |
| 57. | Part 3: Total personal and household items, line 15 | _ | \$900.00 | |
| 58. | Part 4: Total financial assets, line 36 | _ | \$510.00 | |
| 59. | Part 5: Total business-related property, line 45 | | \$0.00 | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | | \$0.00 | |
| 61. | Part 7: Total other property not listed, line 54 | + _ | \$0.00 | |
| | | | | |

\$1,410.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

62. Total personal property. Add lines 56 through 61...

\$1,410.00

\$1,410.00

Official Form 106A/B Schedule A/B: Property page 5

| | Ouc | 50 10 20020 Box | Document Document | F | Page 15 of 48 | | | | |
|--------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Fil | l in this inform | ation to identify your case | 9: | | | | | | |
| De | btor 1 | Joshua Caban | Middle News | | and Name | | | | |
| De | btor 2 | First Name | Middle Name | L | ast Name | | | | |
| (Sp | ouse if, filing) | First Name | Middle Name | L | ast Name | | | | |
| Un | ited States Ban | kruptcy Court for the: No | ORTHERN DISTRICT OF I | ILLIN | OIS | | | | |
| | se number | | | | | | | | |
| (If K | nown) | | | | | Check if this is an amended filing | | | |
| _ | · · · · · · · · | 1000 | | | | | | | |
| | fficial For | | | _ | _ | | | | |
| <u>S</u> | chedule | C: The Prop | erty You Cla | im | as Exempt | 4/16 | | | |
| the nee | property you list | ted on Schedule A/B: Proper attach to this page as man | erty (Official Form 106A/B) | as yo | our source, list the property that you | or supplying correct information. Using a claim as exempt. If more space is a additional pages, write your name and | | | |
| spe any fun exe | cific dollar am applicable sta ds—may be un mption to a pa | ount as exempt. Alternati Itutory limit. Some exemp Ilimited in dollar amount. | vely, you may claim the for tions—such as those for However, if you claim an | ull fai heal exen | ir market value of the property be th aids, rights to receive certain nption of 100% of fair market val | One way of doing so is to state a eing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the nt, your exemption would be limited | | | |
| Pa | rt 1: Identify | the Property You Claim a | as Exempt | | | | | | |
| 1. | Which set of | exemptions are you claim | ing? Check one only, ever | n if yo | our spouse is filing with you. | | | | |
| | You are clai | iming state and federal non | bankruptcy exemptions. 1 | 1 U.S | S.C. § 522(b)(3) | | | | |
| | ☐ You are clai | iming federal exemptions. | 11 U.S.C. § 522(b)(2) | | - ,,,, | | | | |
| 2. | For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below. | | | | | | | | |
| | Brief descriptio | n of the property and line on | Current value of the | Am | Specific laws that allow exemption | | | | |
| | Schedule A/B th | nat lists this property | portion you own Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | | |
| | Household F | *********** | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) | | | |
| | Line from Sche | edule A/B: 6. 1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Clothing | | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(a) | | | |
| | Line from Sche | edule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Cash | edule A/B; 16.1 | \$10.00 | | \$10.00 | 735 ILCS 5/12-1001(b) | | | |
| | Line from Gene | Saule A/B. 1911 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | | ount: Chase Bank edule A/B: 17.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) | | | |
| | | | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| 3. | (Subject to adj | | ery 3 years after that for ca | ses fi | led on or after the date of adjustme | | | | |

Yes

Official Form 106C

No

Case 18-23623 Doc 1 Filed 08/21/18 Entered 08/21/18 15:35:03 Desc Main Page 16 of 48 Case number (if known) Document

Debtor 1 Joshua Caban

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1 | Joshua Caban | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | Case 10-23023 L | Document | Page 1 | R of 18 | 5 Desc Main |
|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Fill in this in | formation to identify your o | | T MMC I | 7 (7) 40 | |
| Debtor 1 | Joshua Caban | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | s Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLI | NOIS | | |
| Case numbe | r | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Schedule | | /ho Have Unsecured (| | Part 2 for creditors with NONPR | 12/15 |
| any executory Schedule G: E: Schedule D: Ci eft. Attach the name and case | contracts or unexpired leases xecutory Contracts and Unexpireditors Who Have Claims Sect Continuation Page to this page a number (if known). | that could result in a claim. Also lis ired Leases (Official Form 106G). Do ured by Property. If more space is not le. If you have no information to report | t executory on not include eeded, copy t | ontracts on Schedule A/B: Pro any creditors with partially sec he Part you need, fill it out, nu | perty (Official Form 106A/B) and on ured claims that are listed in mber the entries in the boxes on the |
| Part 1: Li | st All of Your PRIORITY Un | secured Claims | | | |
| | editors have priority unsecured | d claims against you? | | | |
| | to Part 2. | | | | |
| ☐ Yes. | | | | | |
| ☐ No. Yo ☐ Yes. 4. List all of unsecured | your nonpriority unsecured cla | art. Submit this form to the court with your aims in the alphabetical order of the your cach claim. For each claim listed, | creditor who | holds each claim. If a creditor hype of claim it is. Do not list claim | s already included in Part 1. If more |
| Part 2. | reditor noids a particular ciaim, ii | ist the other creditors in Part 3.If you ha | ive more man | three nonphonty unsecured claim | is fill out the Continuation Page of |
| | | | | | Total claim |
| 4.1 Cap | ital One | Last 4 digits of acco | unt number | 4447 | \$467.00 |
| Attn | riority Creditor's Name n: Bankruptcy Box 30285 | When was the debt i | d2 | Opened 03/16 Last Ac 7/14/18 | tive |
| | Lake City, UT 84130 | when was the debt i | ncurreu : | 1/14/10 | |
| Numb | per Street City State Zlp Code | As of the date you fil | e, the claim i | s: Check all that apply | |
| Who | incurred the debt? Check one. | | | | |
| ■ De | ebtor 1 only | ☐ Contingent | | | |
| □ De | ebtor 2 only | ☐ Unliquidated | | | |
| □ De | ebtor 1 and Debtor 2 only | ☐ Disputed | | | |
| ☐ At | t least one of the debtors and and | other Type of NONPRIORI | TY unsecured | I claim: | |
| □ сі | heck if this claim is for a comm | nunity | | | |
| debt Is the | e claim subject to offset? | report as priority claim | S | ration agreement or divorce that | you did not |
| ■ No | 0 | ☐ Debts to pension of | or profit-sharin | g plans, and other similar debts | |
| □ Y€ | es | ■ Other. Specify _C | redit Card | | |

Document Page 19 of 48 Debtor 1 Joshua Caban Case number (if know) \$1,948.00 4.2 **Chase Card Services** Last 4 digits of account number 7931 Nonpriority Creditor's Name **Correspondence Dept** Opened 06/17 Last Active Po Box 15298 When was the debt incurred? 8/03/18 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **Credit One Bank** Last 4 digits of account number 9678 \$509.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/18 Last Active Po Box 98873 When was the debt incurred? 08/18 Las Vegas, NV 89193 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 Jeffery M. Leving Last 4 digits of account number 3321 \$9,616.47 Nonpriority Creditor's Name 19 South LaSalle Street When was the debt incurred? 03/2018 **Suite 1500** Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

■ Other. Specify Legal Fees

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Page 20 of 48 Document Debtor 1 Joshua Caban Case number (if know) \$327.00 4.5 **Merchants Credit** Last 4 digits of account number 1409 Nonpriority Creditor's Name 223 W Jackson Blvd Opened 07/15 Last Active Ste 700 When was the debt incurred? 10/14 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Midwest Imaging** Other. Specify Professionals ☐ Yes 4.6 **Merchants Credit** \$448.00 Last 4 digits of account number 2435 Nonpriority Creditor's Name 223 W Jackson Blvd Opened 04/13 Last Active Ste 700 When was the debt incurred? 10/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Midwest Imaging** Other. Specify Professionals ☐ Yes 4.7 Priscilla Rosa Last 4 digits of account number Unknown Nonpriority Creditor's Name 3619 West North Avenue When was the debt incurred? Second Floor Chicago, IL 60647 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Domestic Support obligation** Child Support

tt 3: List Others to Be Notified About a Debt That You Already Listed

☐ Yes

Other. Specify Notice Only

Non-dischargeable

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Debtor 1 Joshua Caban

Case number (if know)

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|-----------------------|-----|---------------------------------------------------------------------------------------------------------|-----|----|-------------|
| Total | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | | | | Ψ | |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 13,315.47 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 13,315.47 |

| | | DUGUITIC | III FAU C ZZ UI 40 | |
|---------------------|--------------------------|-------------------|-------------------------------|--|
| Fill in this info | rmation to identify your | case: | | |
| Debtor 1 | Joshua Caban | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit Name, Numb | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|---------------------------|-------------------------------------------------------|-------------------|-----------------------------------------|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | <u> </u> |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | <u> </u> | | Otato | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | Jity | | Oldic | | |

| | | Docume | ent Page 23 d | of 48 | |
|----------------------------------------------------|--------------------------------------------------------------------|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Joshua Caban | | | | |
| Dobtor 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filin | ng) First Name | Middle Name | Last Name | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numb | hor | | | | |
| (if known) | nei | | | ☐ Check if this is an | |
| | | | | amended filing | |
| Sched Codebtors Decople are ill it out, a | filing together, both are equal number the entries in the | re also liable for any deb ally responsible for supp boxes on the left. Attack | olying correct informat | 12/1: as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Pages to this page. On the top of any Additional Pages, write | ge, |
| | and case number (if known | | | and the second second | |
| 1. DO S | you have any codebtors? (If | you are filing a joint case, | do not list either spouse | e as a codeptor. | |
| ■ No □ Yes | 3 | | | | |
| ■ No. □ Yes 3. In Column line | 2 again as a codebtor only | use, or legal equivalent live tors. Do not include your if that person is a guaran | e with you at the time? spouse as a codebtor tor or cosigner. Make | r if your spouse is filing with you. List the person sho sure you have listed the creditor on Schedule D (Offi 06G). Use Schedule D, Schedule E/F, or Schedule G to | cial |
| out Co | olumn 2. | | | | |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe the del Check all schedules that apply: | ot |
| 2.4 | | | | Cabadula D. lina | |
| 3.1 | Name | | | ☐ Schedule D, line | |
| | | | | ☐ Schedule E/F, line | |
| _ | | | | | |
| | Number Street City | State | ZIP Code | | |
| | • | | | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| - | Number Street | | | — | |
| | Number Street City | State | ZIP Code | | |
| | | | | | |

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| | in this information to identify your cabtor 1 Joshua Cab | | | | | | | | | |
|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------|------------------------|------|-------------|-------------------------|--------------------------|------------------------------|----------|
| | btor 2 | | | | _ | | | | | |
| | ited States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | | |
| _ | se number nown) | | - | | | □ A | | ed filing ent showin | g postpetition | |
| 0 | fficial Form 106l | | | | | Ī | // / DD/ Y | YYY | | |
| S | chedule I: Your Inc | ome | | | | | | | | 12/1 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment Fill in your employment | r spouse is not filing wi | ith you, do not inclu | ide infor | mati | on abou | t your spo umber (if | ouse. If mo known). A | ore space is answer every | needed, |
| ١. | information. | | Debtor 1 | | | | | ling spouse | | |
| | If you have more than one job, attach a separate page with | Employment status | ■ Employed | | | | ☐ Emple | • | | |
| | information about additional employers. | Occupation | ☐ Not employed | Customer Service Agent | | | □ Not e | mpioyeu | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Lowe | ice Age | nτ | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 3601 West Toul Lincolnwood, II | | | | | | | |
| | | How long employed t | here? 2 years | 3 | | | _ | | | |
| Pa | rt 2: Give Details About Mor | nthly Income | | | | | | | | |
| | imate monthly income as of the dause unless you are separated. | ate you file this form. If | you have nothing to r | eport for | any | line, write | e \$0 in the | space. Inc | clude your no | n-filing |
| | ou or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the informatio | n for all e | empl | oyers for | that perso | on on the li | nes below. If | you need |
| | | | | | | For Del | btor 1 | | btor 2 or ing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 2 | ,899.56 | \$ | N/A | - |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | - |
| 4. | Calculate gross Income. Add lir | ne 2 + line 3. | | 4. | \$ | 2,8 | 99.56 | \$ | N/A | |

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| Debto | r 1 | Joshua Caban | - | (| Case i | number (<i>if ki</i> | nown) | | | | |
|-------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|-------------|-----------------------|--------------|-----------|------------|---------------------|----------------------------------------------|
| | | | | | For | Debtor 1 | | | r Debtor | | |
| | Cor | by line 4 here | 4. | | \$ | 2,899 | 9.56 | \$ | n-filing s | N/A | |
| | · | | | | _ | , | | _ | - | | _ |
| | | all payroll deductions: | _ | | _ | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | | \$ | | 6.27 | \$_ \$ | | N/A | _ |
| | 5b. 5c. | Mandatory contributions for retirement plans Voluntary contributions for retirement plans | 5b 5c | | \$ - | | 0.00 | \$ \$ | | N/A N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d | | \$ - | | 0.00 0.00 | \$_ | | N/A | _ |
| | 5a. 5e. | Insurance | 5e | | \$ - | | 9.61 | \$_ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | | \$_ | | 5.18 | \$ | | N/A | _ |
| | 5g. | Union dues | 5g | ١. | \$ | | 0.00 | \$ | | N/A | _ |
| | 5h. | Other deductions. Specify: | _ 5h | | \$ | | 0.00 | + \$_ | | N/A | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | 1,41 ⁻ | 1.06 | \$_ | | N/A | <u>. </u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 1,488 | 3.50 | \$_ | | N/A | <u>. </u> |
| | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | |
| | | monthly net income. | 8a | ١. | \$ | (| 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | 8b |). | \$ | | 0.00 | \$ | | N/A | |
| i | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | : <u>.</u> | \$ | | 0.00 | \$ | | N/A | _ |
| | 8d. | Unemployment compensation | 8d | ١. | \$ | | 0.00 | \$ | | N/A | _ |
| | 8e. | Social Security | 8e |) . | \$ | | 0.00 | \$ | | N/A | _ |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. 8g | | \$ | | 0.00 0.00 | \$_ \$ | | N/A N/A | _ |
| | 8h. | Other monthly income. Specify: | _ |). 1.+ | \$ — | | 0.00 | + \$- | | N/A | _ |
| | ···· | | | | | | 0.00 | | | | <u>-</u> |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | ; | \$ | | 0.00 | \$_ | | N/ | A |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,488.50 | + \$ | | N/A | = \$ | 1,488.50 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | ., | | | | | 1,100.00 |
| | Incli othe Do i | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depe | | • | , | | • | Schedule | e <i>J</i> . +\$ | 0.00 |
| , | | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | | | e. 12. | \$ | 1,488.50 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form No. | ? | | | | | | | Combi month | ned ly income |
| | _ | Yes Explain: | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

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| Fill in this information to identify your case: Debtor 1 Joshua Caban | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------|--------------------|-------------------------------|
| Debtor 1 Joshua Caban | | | | |
| | | Check | if this is: | |
| Debtor 2 | | _ | an amended filing | ving postpetition chapter |
| (Spouse, if filing) | | | | the following date: |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOI | DIS | | MM / DD / YYYY | |
| Case number | | | | |
| (If known) | | | | |
| Official Form 106J | | | | |
| | | | | 40/4/ |
| Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are | filing together, both | are equa | lly responsible fo | 12/15 |
| information. If more space is needed, attach another sheet to this fo number (if known). Answer every question. | | | | |
| Part 1: Describe Your Household | | | | |
| 1. Is this a joint case? | | | | |
| ■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| □ No | | | | |
| Yes. Debtor 2 must file Official Form 106J-2, Expenses for | for Separate Household | d of Debto | or 2. | |
| 2. Do you have dependents? ■ No | | | | |
| Do not list Debtor 1 and Yes. Fill out this information for each dependent | Dependent's relations Debtor 1 or Debtor 2 | hip to | Dependent's age | Does dependent live with you? |
| Do not state the | | | | □ No |
| dependents names. | | | | ☐ Yes |
| | | | | □ No |
| | | | | ☐ Yes |
| | | | | □ No □ Yes |
| | | | | □ res |
| | | | | ☐ Yes |
| 3. Do your expenses include ■ No | | | | 00 |
| expenses of people other than yourself and your dependents? | | | | |
| yoursen and your dependents? | | | | |
| Part 2: Estimate Your Ongoing Monthly Expenses | | | | |
| Estimate your expenses as of your bankruptcy filing date unless you expenses as of a date after the bankruptcy is filed. If this is a supple applicable date. | emental <i>Schedule J</i> , o | as a sup check the | box at the top o | f the form and fill in the |
| Include expenses paid for with non-cash government assistance if y | vou know | | | |
| the value of such assistance and have included it on Schedule I: You (Official Form 106I.) | | | Your exp | enses |
| (Official Form Fool.) | | | | |
| The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot. | clude first mortgage | 4. \$ | | 600.00 |
| If not included in line 4: | | | | |
| 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 0.00 |
| 4d. Homeowner's association or condominium dues5. Additional mortgage payments for your residence, such as home | ne equity loans | 4d. \$ 5. \$ | | 0.00 |

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| Debtor 1 Joshua Caba | <u>n</u> | Case num | iber (if known) | |
|---------------------------|---------------------------------------------------------------------------------------------------------------------|---------------------|-----------------|---------------------------|
| 6. Utilities: | | | | |
| 6a. Electricity, heat | natural gas | 6a. | \$ | 70.00 |
| | arbage collection | 6b. | | 0.00 |
| | phone, Internet, satellite, and cable services | 6c. | | 200.00 |
| 6d. Other. Specify: | priorio, interriot, catelinto, and cable convicce | 6d. | · | 0.00 |
| . Food and housekeep | ning sunnlies | 7. | · | 250.00 |
| | en's education costs | 8. | · | 0.00 |
| Clothing, laundry, ar | | | \$ | 140.00 |
| D. Personal care produ | | 9. 10. | | |
| • | | | · | 100.00 |
| Medical and dental e | • | 11. | Ф | 30.00 |
| Do not include car pay | de gas, maintenance, bus or train fare. | 12. | \$ | 200.00 |
| | recreation, newspapers, magazines, and books | 13. | · . | 0.00 |
| | ons and religious donations | 14. | · | 0.00 |
| 5. Insurance. | ons and rengious donations | 14. | Ψ | 0.00 |
| | nce deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life insurance | 100 addadtod from your pay or moraded in lines 4 of 20. | 15a. | \$ | 0.00 |
| 15b. Health insurance | e | 15b. | · | 0.00 |
| 15c. Vehicle insuran | | 15c. | * | 0.00 |
| 15d. Other insurance | | 15d. | · | 0.00 |
| | taxes deducted from your pay or included in lines 4 or 20 | | Ψ | 0.00 |
| Specify: | taxes deducted from your pay of included in lines 4 of 20 |). 16. | \$ | 0.00 |
| 7. Installment or lease | payments: | | · | 0.00 |
| 17a. Car payments for | or Vehicle 1 | 17a. | \$ | 0.00 |
| 17b. Car payments for | or Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. Other. Specify: | | 17c. | \$ | 0.00 |
| 17d. Other. Specify: | | 17d. | \$ | 0.00 |
| | mony, maintenance, and support that you did not rep pay on line 5, <i>Schedule I, Your Income</i> (Official Form | | \$ | 0.00 |
| | make to support others who do not live with you. | 1001). | \$ | 0.00 |
| Specify: | , , , , , , , , , , , , , , , , , , , , | 19. | · ——— | |
| . , | expenses not included in lines 4 or 5 of this form or or | | | |
| 20a. Mortgages on o | | 20a. | | 0.00 |
| 20b. Real estate taxe | • • • | 20b. | | 0.00 |
| | owner's, or renter's insurance | 20c. | | 0.00 |
| | epair, and upkeep expenses | 20d. | · | 0.00 |
| | ssociation or condominium dues | 20e. | · | 0.00 |
| Other: Specify: | 3300iation of condominant ducs | | +\$ | |
| . Other. Specify: | | | +φ | 0.00 |
| 2. Calculate your mont | , , | | | |
| 22a. Add lines 4 throu | • | | \$ | 1,590.00 |
| 22b. Copy line 22 (mo | nthly expenses for Debtor 2), if any, from Official Form 10 |)6J-2 | \$ | |
| 22c. Add line 22a and | 22b. The result is your monthly expenses. | | \$ | 1,590.00 |
| 3. Calculate your mont | hly net income. | | | |
| - | our combined monthly income) from Schedule I. | 23a. | \$ | 1,488.50 |
| | thly expenses from line 22c above. | 23b. | · | 1,590.00 |
| 200. Oopy your more | any expenses nomino 226 above. | 230. | Ψ | 1,090.00 |
| | onthly expenses from your monthly income. | | | 404 50 |
| The result is you | ur monthly net income. | 23c. | \$ | -101.50 |
| 4. Do vou expect an inc | crease or decrease in your expenses within the year a | ifter vou file this | s form? | |
| For example, do you exp | ect to finish paying for your car loan within the year or do you expe | | | ase or decrease because o |
| modification to the terms | of your mortgage? | | | |
| ■ No. | | | | |
| Π Yes Exp | ain here: | | | |

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| Fill in this informa | tion to identify your o | case: | | | | |
|---------------------------------|------------------------------------------------|----------------------------|-----------------|-------------------------|---------------------------------------------|------------------------------------------------------------|
| Debtor 1 | Joshua Caban | Middle News | Last Nam | Α | | |
| Dahtar 2 | First Name | Middle Name | Last Hall | 0 | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Nam | е | | |
| United States Bank | cruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | Check if this is an amended filing |
| | | | | | | |
| Official Form | 106Dec | | | | | |
| Declarati | on About a | an Individual | Debtor | 's Schedul | es | 12/15 |
| | | r, both are equally respo | | shedules Making a | also statement co | oncealing property, or |
| obtaining money | or property by fraud i U.S.C. §§ 152, 1341, | n connection with a ban | kruptcy case ca | an result in fines up t | o \$250,000, or imp | Prisonment for up to 20 |
| Sign | Below | | | | | |
| Did you pay | or agree to pay some | eone who is NOT an atto | rney to help yo | u fill out bankruptcy | forms? | |
| No No | | | | | | |
| ☐ Yes. N | ame of person | | | | Attach Bankruptcy F Declaration, and Sig | Petition Preparer's Notice, gnature (Official Form 119) |
| Under penal | ty of perjury, I declar | e that I have read the sur | mmary and sch | edules filed with this | declaration and | |
| | ehm (& | | X | | | |
| X Joshua Signatur | Caban re of Debtor 1 | | S | Signature of Debtor 2 | | |

| | | nation to identify you | r case: | | | |
|-------|---------------------|--------------------------------------------|--------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------|
| Deb | tor 1 | Joshua Caban First Name | Middle Name | Last Name | | |
| Deb | tor 2 | | | | | |
| (Spo | use if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ed States Bar | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Cas | e number | | | | | Check if this is an |
| | | | | | a | mended filing |
| ∩ff | ficial Fo | rm 107 | | | | |
| | | | Affairs for Indivi | duals Filing for B | ankruptcy | 4/16 |
| infor | mation. If m | | attach a separate sheet to | | equally responsible for sup additional pages, write you | |
| Par | Give D | etails About Your Ma | urital Status and Where You | Lived Before | | |
| 1. | What is your | current marital statu | ıs? | | | |
| | ☐ Married ■ Not mar | ried | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No | | | | | |
| | _ | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>ı</i> . | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No | | | | | |
| | _ | ke sure you fill out Sch | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Par | Explai | n the Sources of You | r Income | | | |
| | Fill in the tota | I amount of income yo | u received from all jobs and a | ng a business during this yeall businesses, including partetogether, list it only once ur | | ndar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$22,133.50 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Debtor 1 Joshua Caban

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Case number (if known)

| | | | | | | Debtor 1 | | | | Debtor 2 | | |
|-----|----------------------|---------------------------------------|-----------------------------------|---------------------------------------------|----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------------------------------|-----------------------------------|-------------------------------------------------------|
| | | | | | | Sources of income Check all that apply. | | Gross income (before deductions and exclusions) | d | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | r last c | | | | 1, 2017) | ■ Wages, commission bonuses, tips | ons, | \$28,002.0 | 0 | ☐ Wages, combonuses, tips | missions, | |
| | | | | | | ☐ Operating a busine | ess | | | ☐ Operating a | business | |
| | | | | | ore that: 1, 2016) | ■ Wages, commission bonuses, tips | ons, | \$27,500.0 | 0 | ☐ Wages, combonuses, tips | missions, | |
| | | | | | | ☐ Operating a busine | ess | | | ☐ Operating a | business | |
| 5. | Includ and of winnin | le inc ther p ngs. If ach se | ome i oublic f you ource | egardl benefi are filir | ess of wheth t payments; ng a joint cas ne gross inco | e during this year or the er that income is taxable pensions; rental income e and you have income me from each source so | e. Exame; interes | ples of other income ar it; dividends; money col u received together, list | re alir llecte it on | ed from lawsuits; ly once under De | royalties; and ebtor 1. | |
| | | | | | | Debtor 1 | | | | Debtor 2 | | |
| | | | | | | Sources of income | | Gross income from | | Sources of inc | omo | Gross income |
| | | | | | | Describe below. | | each source (before deductions and exclusions) | d | Describe below | | (before deductions and exclusions) |
| Par | rt 3: | List | Certa | in Pay | ments You | Made Before You File | d for Ba | nkruptcy | | | | |
| 6. | _ | No. | Neith indiv Durir | ner De idual p ng the 9 No. Yes | btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include | s debts primarily consector 2 has primarily of personal, family, or houre you filed for bankrupt and creditor to whom you editor. Do not include payments to an attorney on 4/01/19 and every 3 | consumusehold tcy, did you paid a ayments y for this | ner debts. Consumer depurpose." you pay any creditor a total of \$6,425* or mofor domestic support of bankruptcy case. | otal ore in bliga | of \$6,425* or mo one or more pay tions, such as ch | re? ments and thild support an | ne total amount you nd alimony. Also, do |
| | ■ Y | Yes. | | | | r both have primarily or re you filed for bankrup | | | otal o | of \$600 or more? | | |
| | | | | | Go to line 7 | | | | | | | |
| | | | | Yes | include pay | ach creditor to whom you ments for domestic supp this bankruptcy case. | | | | | | |
| | Cred | litor's | Nan | ne and | Address | Dates of p | ayment | Total amount paid | | Amount you still owe | Was this p | ayment for |

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| 7. | Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony. ■ No □ Yes. List all payments to an insider. | tners; relatives of any gene control, or owner of 20% or | eral partners; partners of their voting | rships of which yo securities; and ar | u are a general p ny managing age | artner; corporations nt, including one fo |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------------|------------------------------------------|--------------------------------------|----------------------------------------------|
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for thi | s payment |
| 8. | Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi No | | ments or transfer a | ny property on a | ccount of a debt | that benefited an |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for thi | |
| Pai | t 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title | Nature of the case | Court or aganay | | Status of the o | |
| | Case number | Nature of the case | Court or agency | | Status of the C | ase |
| | Priscilla Rosa v. Joshua Caban | Child custody and support | Circuit Court of County 50 W Washngto Chicago, IL 606 | on | ☐ Pending ☐ On appeal ☐ Concluded | |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | rty repossessed, fo | oreclosed, garnis | hed, attached, s | eized, or levied? |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happened | | | | property |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details. | | uding a bank or fin | ancial institution | , set off any amo | ounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date taken | action was | Amount |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or ar ■ No □ Yes | | rty in the possessi | on of an assigne | e for the benefit | of creditors, a |

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Case number (if known) Document Debtor 1 Joshua Caban

| Pai | tt 5: List Certain Gifts and Contribution | ıs | | | |
|-----|--------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------|
| 3. | Within 2 years before you filed for bankr | uptcy, | did you give any gifts with a total value of more th | an \$600 per person | ? |
| | ■ No | | | | |
| | ☐ Yes. Fill in the details for each gift. | | | | |
| | Gifts with a total value of more than \$60 per person | 00 | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | |
| 4. | Within 2 years before you filed for bankr ■ No | uptcy, | did you give any gifts or contributions with a tota | l value of more than | \$600 to any charity? |
| | ☐ Yes. Fill in the details for each gift or c | ontribu | tion. | | |
| | Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | | Describe what you contributed | Dates you contributed | Value |
| Pai | rt 6: List Certain Losses | | | | |
| 5. | Within 1 year before you filed for bankru or gambling? No Yes. Fill in the details. | ptcy o | since you filed for bankruptcy, did you lose anyt | hing because of the | ft, fire, other disaster, |
| | Describe the property you lost and | Descr | ibe any insurance coverage for the loss | Date of your | Value of property |
| | how the loss occurred | Includ | e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property. | loss | lost |
| | rt 7: List Certain Payments or Transfers | | The stating of the contraction o | | |
| 6. | consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition p | prepari | id you or anyone else acting on your behalf pay ong a bankruptcy petition? rs, or credit counseling agencies for services required | | rty to anyone you |
| | Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y | ′ou | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Law Office of Thayer C. Torgerson 2400 North Western Avenue Chicago, IL 60647 ted@tedtorgersonlaw.com | | Attorney Fees | 8/17/2018 | \$1,265.00 |
| 7. | Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that | ditors o | | r transfer any prope | rty to anyone who |
| | ■ No | | | | |
| | Yes. Fill in the details. | | | _ | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |

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Case number (# known) Document

Debtor 1 Joshua Caban

| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details. | usiness or financial affa ade as security (such as | airs? the granting of a | | • • • | |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|----------------------------|------------------|----------------------------------------------------|-----------------------------------------------|
| | Person Who Received Transfer Address Person's relationship to you | Description and very property transfer | | | ny property or received or debts change | Date transfer was made |
| | . , | | | | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro | | ny property to a | self-settled tru | st or similar device o | of which you are a |
| | Yes. Fill in the details. | | | | | |
| | Name of trust | Description and v | value of the prop | perty transferre | ∤d | Date Transfer was made |
| Par | List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and Sto | orage Units | | |
| 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, association in the setails. | or other financial accou | nts; certificates | of deposit; sha | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accou | clos | e account was sed, sold, ved, or nsferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | year before you filed for | r bankruptcy, an | y safe deposit | box or other deposit | ory for securities, |
| | No No | | | | | |
| | Yes. Fill in the details. Name of Financial Institution | Who also had see | naga ta it2 | Deceribe the | antonto | De veu etill |
| | Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe the o | ontents | Do you still have it? |
| 22. | Have you stored property in a storage unit o | or place other than you | r home within 1 | year before yo | u filed for bankruptcy | y? |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe the c | ontents | Do you still have it? |
| Par | 19: Identify Property You Hold or Control | for Someone Fise | | | | |
| 23. | Do you hold or control any property that so for someone. | | ude any propert | y you borrowe | d from, are storing fo | or, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe the p | property | Value |
| Par | t 10: Give Details About Environmental Info | ormation | | | | |
| For | the nurpose of Part 10, the following definiti | ons anniv | | | | |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Page 34 of 48 Case number (if known) Debtor 1 Joshua Caban

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date of notice Reversed Rev | | nazardous materiai, ponutant, contaminant, or | Sillinar term. | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|---------------------------------------------------|------------------------------------------|---------------------------------------|--------------------|
| No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) An owner of a limited liability company (LLC) or limited liability partnership (LLP) An owner of a limited liability company (LLC) or limited liability partnership (LLP) An owner of at least 5% of the votting or equity securities of a corporation An owner of at least 5% of the votting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN Dates business existed Date Issued Address Name Address Ad | Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of when | they occurred. | |
| Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, | 24. | Has any governmental unit notified you that yo | ou may be liable or potentially liable | under or in violation of an environme | ntal law? |
| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Number Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Statu | | | | | |
| No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) No Horse Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper No No Street, City, State and ZIP Code) Date Issued Address Date Issued Address Date Issued | | | Address (Number, Street, City, State and | | Date of notice |
| Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Name Nature of the case Status of the case Status of the case Number Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case Status of the case Number Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case Status of the case Nature of the case Status of the case Status of the case Nature of the case Status of the case Status of the case Nature of the case Status of the case Status of the case Nature of the case Status of the case Status of the case Status of the case Nature of the case Status of the case S | 25. | Have you notified any governmental unit of any | y release of hazardous material? | | |
| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7: Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Employer Identification number Do not include Social Security number or ITIN Dates business existed 8: Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address Date Issued | | _ | | | |
| ■ No | | | Address (Number, Street, City, State and | | Date of notice |
| Yes. Fill in the details. Case Title | 26. | Have you been a party in any judicial or admini | istrative proceeding under any envir | onmental law? Include settlements a | nd orders. |
| Case Number Name | | = 110 | | | |
| 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name | | | Name Address (Number, Street, City, | Nature of the case | Status of the case |
| □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address Describe the nature of the business Name Address. Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties. ■ No Yes. Fill in the details below. Name Address Date Issued | Par | 11: Give Details About Your Business or Cor | nnections to Any Business | | |
| ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation ☐ No. None of the above applies. Go to Part 12. ☐ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties. Ano ☐ Yes. Fill in the details below. Name Address Date Issued | 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have any | y of the following connections to any | business? |
| □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Dates business? Include all financial institutions, creditors, or other parties. No □ Yes. Fill in the details below. Name Address Date Issued Address Date Issued Dates | | ☐ A sole proprietor or self-employed in a | trade, profession, or other activity, | either full-time or part-time | |
| □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties. No □ Yes. Fill in the details below. Name Address Date Issued | | ☐ A member of a limited liability company | y (LLC) or limited liability partnershi | p (LLP) | |
| □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Employer Identification number Do not include Social Security number or ITIN Dates business existed Employer Identification number Do not include Social Security number or ITIN Dates business existed Employer Identification number Do not include Social Security number or ITIN Dates business existed Date business? Include all financia institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address Date Issued | | ☐ A partner in a partnership | | | |
| No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address Date Issued | | ☐ An officer, director, or managing execu | utive of a corporation | | |
| Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Address Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address Date Issued | | ☐ An owner of at least 5% of the voting o | r equity securities of a corporation | | |
| Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed Employer Identification number Do not include Social Security number or ITIN Dates business existed No No Yes. Fill in the details below. Name Address Date Issued | | ■ No. None of the above applies. Go to Part | t 12. | | |
| Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address Do not include Social Security number or ITIN Dates business existed Date Issued | | Yes. Check all that apply above and fill in | the details below for each business | | |
| Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financia institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address Date Issued | | | escribe the nature of the business | • • | |
| institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address | | | ame of accountant or bookkeeper | · · | idilibei of friiv. |
| Yes. Fill in the details below. Name Address Date Issued | 28. | | did you give a financial statement to | o anyone about your business? Inclu | de all financial |
| Address | | _ 110 | | | |
| | | Address | ate Issued | | |

Part 12: Sign Below

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 15/9, and 3571.

| Joshua Caban | Signature of Debtor 2
| Signature of Debtor 1 | Date |

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Page 35 of 48e number (if known)

Desc Main

Filed 08/21/18

Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Document

Doc 1

Case 18-23623

Joshua Caban

Debtor 1

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| Debtor 1 | Joshua Caban | | | |
|---------------------|-------------------------|-------------------------------|-------------------|--------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| Case Hullibel | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | ☐ Check if this is an amended filing |
| | | | | |
| (if known) | orm 108 | | | |
| Official Fo | | on for Individu | ıals Filing Undor | amended filing |
| Official Fo | | on for Individu | uals Filing Under | amended filing |
| Official Fo | nt of Intenti | | | amended filing |
| Official Fo Stateme | nt of Intenti | napter 7, you must fill out t | | amended filing |

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

on the form

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|-----------------------------------------------------------|------------------------------------------------------------------|--------------------------------------------------------|
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Joshua Caban | Case number (if know | Case number (if known) | | | |
|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------------|--|--|
| name: Description of property securing debt: | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes | □ Yes | | |
| the information bolow Do not list real es | roperty Leases that you listed in Schedule G: Executory Contracts and Unexpstate leases. Unexpired leases are leases that are still in effect; roperty lease if the trustee does not assume it. 11 U.S.C. § 365(p | o)(2). | | | |
| Describe your unexpired personal property | ty leases | Will the leas | e be assumed? | | |
| Lessor's name: Description of leased Property: | | □ No | | | |
| Lessor's name: Description of leased Property: | | □ No □ Yes | | | |
| Lessor's name: Description of leased Property: | | □ No | | | |
| Lessor's name: Description of leased Property: | | □ No | | | |
| Lessor's name: Description of leased Property: | | □ No □ Yes | | | |
| Lessor's name: Description of leased Property: | | □ No □ Yes | | | |
| Lessor's name: Description of leased Property: | | □ No | | | |
| Under penalty of perjury, I declare that I is property that is subject to an unexpired I | have indicated my intention about any property of my estate the lease. X Signature of Debtor 2 | nt secures a deb | t and any personal | | |
| Signature of Debtor 1 Date 8/7 | Date | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

Case 18-23623 Doc 1 Filed 08/21/18 Entered 08/21/18 15:35:03 Desc Main Document Page 42 of 48 United States Bankruptcy Court Northern District of Illinois

| In re | Joshua Caban | | Case No. | |
|-------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------|
| mic | Coorda Gasari | Debtor(s) | Chapter | 7 |
| | | MPENSATION OF ATTOR | | |
| - | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. I compensation paid to me within one year before be rendered on behalf of the debtor(s) in contempts. | the filing of the netition in pankrupicy. | or agreed to be paid | llows: |
| | For legal services, I have agreed to accept | | | 1,265.00 |
| | Prior to the filing of this statement I have re | ceived | | 1,265.00 |
| | Balance Due | | \$ | 0.00 |
| 2. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | ■ I have not agreed to share the above-disclose | ed compensation with any other person | unless they are men | abers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed c copy of the agreement, together with a list o | ompensation with a person or persons we feel the names of the people sharing in the | who are not members compensation is att | s or associates of my law firm. A ached. |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | case, including: |
| | reaffirmation agreements and ap 522(f)(2)(A) for avoidance of liens | ules, statement of affairs and plan which of creditors and confirmation hearing, at ors to reduce to market value; explications as needed; preparations on household goods. | n may be required; nd any adjourned he emption planning n and filing of mo | arings thereof; |
| 6. | By agreement with the debtor(s), the above-disc Representation of the debtors in any other adversary proceeding. | any dischargeability actions, jud | g service: icial lien avoidan | ces, relief from stay actions or |
| | | CERTIFICATION | | |
| this | I certify that the foregoing is a complete statembankruptcy proceeding. S 17 8 Date | Thayer C. Torge Signature of Attorn Law Office of Th 2400 North West Chicago, IL 6064 | rson ey layer C. Torgerso tern Avenue 17 ax: 773-772-0845 | lorgen |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 7 DEBTORS AND THEIR ATTORNEYS

Chapter 7 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure—but Chapter 7 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 7 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from by their attorneys, but debtors also have responsibilities to their attorneys. By signing this agreement, debtors and their attorneys accept these responsibilities.

BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Advise the debtor of the need to maintain appropriate insurance.

AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 2. Notify the attorney of any change in the debtor's address or telephone number.
- 3. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 4. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 5. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 6. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 7. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 8. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

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- 5. Timely submit to the Chapter 7 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely prepare, file, and serve any necessary statements, amended statements and schedules and any change of address, in accordance with information provided by the debtor.
- 7. Monitor all incoming case information for accuracy and com-pleteness. Contact the trustee promptly regarding any discrepancies.
- 8. Be available to respond to the debtor's questions throughout the term of the plan.
- 9. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 10. Object to improper or invalid claims.
- 11. Timely respond to motions for relief from stay.
- 12. Prepare, file, and serve all appropriate motions to avoid liens.
- 13. Provide any other legal services necessary for the administration of the case.

ALLOWANCE AND PAYMENT OFATTORNEYS' FEES

1. Any attorney retained to represent a debtor in a Chapter 7 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a fee of

\$1,265.00 Attorney's Fees \$335.00 Filing Fee

- 2. Prior to signing this agreement the attorney has received \$__1,600.00__\ leaving a balance due of \$_0.00_\. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.
- 3. Early termination of the case. Fees payable under the provisions set out above are not refundable in the event that the case is dismissed, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If a dismissal is due to such a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 4. Retainers. The attorney may receive a retainer or other payment before filing the case,

but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

- a. Any retainer received by the attorney will be treated as an advance payment, allowing the attorney to take the retainer into income immediately. The reason for this treatment is the following:
- 5. In any application for fees, whether or not requiring an itemization, the attorney shall disclose to the court any fees paid by the debtor prior to the case filing.
- 6. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 7. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 8. Discharge of the attorney. The debtor may discharge the attorney at any time.

| Debtor: Smen a | |
|----------------|--|
| Date: | |
| Joint Debtor: | |
| Date: | |

Attorney for Debtor(5)

Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

1. lorger

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United States Bankruptcy Court Northern District of Illinois

| | | Morthern District of Himors | | |
|-------|------------------------------------------------|-----------------------------------------|------------------------|-------------------|
| In re | Joshua Caban | Debtor(s) | Case No. Chapter 7 | |
| | | | | |
| | VERII | FICATION OF CREDITOR MA | ATRIX | |
| | | Number of O | Creditors: | 7 |
| | | | | |
| | The above-named Debtor(s) her (our) knowledge. | reby verifies that the list of creditor | ors is true and correc | to the best of my |
| Date: | 8/17/(8 | Joshua Caban Signature of Debtor | | |

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193

Jeffery M. Leving 19 South LaSalle Street Suite 1500 Chicago, IL 60603

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Priscilla Rosa 3619 West North Avenue Second Floor Chicago, IL 60647